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CONFIRMATION NO. 3966

Bib Data Sheet

SERIAL NUMBER 10/766,647	FILING OR 371(c) DATE 01/27/2004 RULE	CLASS 424	GROUP ART UNIT 1616	ATTORNEY DOCKET NO. 00025.04CON
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 10/151,596 05/16/2002  
 which claims benefit of 60/294,203 05/24/2001  
 and claims benefit of 60/317,479 09/05/2001  
 This application 10/766,647  
 is a CON of 10/735,497 12/12/2003  
 which is a CON of 10/151,596 05/16/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 06/18/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	1	18	6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

37485

**TITLE**

Delivery of analgesics through an inhalation route

FILING FEE RECEIVED 514	<p>FEES: Authority has been given in Paper        No. _____ to charge/credit DEPOSIT ACCOUNT        No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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